

FEDERAL COMMUNICATIONS COMMISSION
Washington, DC 20554Approved by OMB
3060-0076
Est. time per response:
1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information

1. Name and Mailing Address of Respondent

SOUTH CENTRAL TELEPHONE ASSN INC
PO BOX B, 215 S. ILIFF ST
MEDICINE LODGE, KS 67104

2. Year Report Filed

2017

3. Reporting Period (Ending Date of Pay
Period Covered by Report)
3/31/20174. Number of Full-Time Employees during Selected
Reporting Period (check one):
a. ☐ Fewer than 16 (complete Sections I, IV, and V only)
b. ☒ 16 or more (complete all sections)☐ Check here if this
is a change of
address.

SECTION II - Full-Time Employees.

Job Categories		Number of Employees (Report employees in only one category) Race/Ethnicity																
		Not-Hispanic or Latino															Total Columns A - N	
		Male							Female									
		Hispanic or Latino	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races				
Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races					
Executive/Senior Level Officials and Managers	1.1			1											1			
First/Mid-Level Officials and Managers	1.2			2						4					6			
Professionals	2			1											1			
Technicians	3			5	1					1					7			
Sales Workers	4									5					5			
Administrative Support Workers	5									7					7			
Craft Workers	6			5											5			
Operatives	7			1											1			
Laborers and Helpers	8														0			
Service Workers	9			1											1			
TOTAL	10	0	0	16	1	0	0	0	0	17	0	0	0	0	34			
PREVIOUS YEAR TOTAL	11	0	0	17	1	0	0	0	0	18	0	0	0	0	36			

SECTION III - Part-Time Employees.

Job Categories	Number of Employees (Report employees in only one category)														
	Race/Ethnicity														
	Hispanic or Latino							Not-Hispanic or Latino							


	Male		Female		White		Black or African American		Native Hawaiian or Other Pacific Islander		Asian		American Indian or Alaska Native		Two or more races		Total
	A	B	C	D	E	F	G	H	I	J	K	L	M	N			
Executive/Senior Level Officials and Managers	1.1																0
First/Mid-Level Officials and Managers	1.2																0
Professionals	2																0
Technicians	3																0
Sales Workers	4																0
Administrative Support Workers	5								1								1
Craft Workers	6																0
Operatives	7																0
Laborers and Helpers	8																0
Service Workers	9																0
TOTAL	10	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
PREVIOUS YEAR TOTAL	11	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1

SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.

- ☒ This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.
- ☐ This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.)

SECTION V - Certification

I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date 5/9/17	Typed or Printed Name of Person Signing KELLY JOHNSON	Signature 	Telephone No. (620) 930-1000
Title of Person Signing CEO/GENERAL MANAGER		WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	